

CITY OF RYE 2002 TENNIS PERMIT APPLICATION

Payee Last Name: _____ Permit # _____

Address: _____
Street Apt #

City State Zip Telephone #

Number of permits requested	Type of Permit	Fee	Amount
	Junior Resident (Ages 6-18)	\$35	
	Adult Resident (Ages 19-59)	75	
	Senior Resident (Ages 60+)	50	
	Weekday Only Resident (Ages 18+, Mon.-Fri.)	55	
	College Student Resident (Ages 18-25 with valid College ID) Good only in June, July, August	55	
	Family Resident (Includes Juniors) Limit 5 Children	200	
	Non-Resident or Summer Resident	225	
	Guest Pass Book - 10 Passes	80	
Date of Birth	Family Members (Please list all permit holders)	Sex	

As a Participant in the above program, I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risks of any injuries, damages or loss, which my child or I may sustain as a result of such participation. I further understand the City of Rye does not provide accidental medical coverage and it is my responsibility to provide appropriate coverage. I agree to waive and relinquish all claims and hold harmless the City of Rye, Recreation Department, its officers, agents and employees from any and all claims.

Signature: _____ Date: _____

METHOD OF PAYMENT

☐ Make Check Payable to "City of Rye"

☐ Charge my Credit Card (circle one) Master Card Visa Discover

Credit Card number

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Expiration Date: ____ / ____
Month / Year

PRINT Card Holder Name _____

Card Holder Signature _____